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nal, but was due largely to improvements in methods of investigation and diagnosis and to more precise instruments in the laboratories and in practice. Improved microscopes made possible the science of bacteriology and the discovery of phagocytes, opening up a wide field of definite knowledge as to the causation and cure of diseases. Appliances for examination of the blood and the urine made possible more accurate diagnoses. One writer has said that the nineteenth century taught doctors more of what not to do, as it abolished the absurd practices of bleeding and purging and the disgusting and senseless remedies.

Discovery of Alkaloids. In 1805, an obscure apothecary in Germany, named Seturner, first isolated an alkaloid, morphine. His discovery is considered one of the greatest of the nineteenth century. As his method of separating the alkaloid is essentially the same as that used today, and as such alkaloids as strychnine, quinine, atropine, and morphine are of vital importance to modern medicine, his name may well be called great.

About 1890, there was a movement called Nihilism, which advocated the abolition of all drugs. This represented the extreme elements in the profession, but from that time the sentiment has fast grown that drugging is no longer the chief function of the doctors. There is now in process of formation a new school of medicine which has a firm faith in a few well-tried drugs, such as quinine, iron, mercury, opium, digitalis; and little or no faith in most of the others.

So the increased knowledge of drugs has brought two results, an aversion to their indiscriminate use and an increased confidence in their powers when in the hands of practitioners who understand their properties. The tendency at the present time is toward the use of fewer drugs with a better understanding of their action.

CLOUDCROFT BABY SANITARIUM

By A. LOUISE DIETRICH, R.N.

El Paso, Texas

Cloudcroft is a reservation owned by the El Paso Southwestern Railroad and is situated on the top of the Sacramento Mountains. It is twenty-five miles from the Mescalero Indian reservation and is one of the most beautiful places in the United States. It is 9000 feet in altitude and to reach it one must ride twenty-six miles, steadily climbing around and up the mountains. The views are marvelous, with the pines, some of which are 300 feet high; aspens growing almost as tall; flowers of every variety and hue; the air sweetly laden with the odor of

the pines and flowers; just the kind that God meant people to breathe. Away off in the distance between the hills is a stretch of white sands, eighteen miles in length. It is not hard to imagine a strip of water and farther in the distance is the White Mountain, covered with snow the year round. Situated on one of the hills, surrounded by trees and flowers, is the Baby Sanitarium, built by the generous subscriptions of men and women whose hearts were touched by the sight of the pitiful sick babies needing a place in which to get well, after it had been amply proven that they could get well. Twelve years ago, one of the physicians carried his sick child to this place and lived in a tent. His wife cared for the baby, he did the work and the air did the rest. The child lived. It was this physician who aroused people to build the Sanitarium. It is a building about 60 by 40, with a main hall about eight feet wide running the entire length of the building. The ward, about 30 by 18, is a large sunny one with twelve windows and two French doors. The entire building inside is painted with white enamel. This ward contains twelve cribs, two screens, tables and chairs. Back of it is the dining room or second ward. Off this is a diet kitchen and main kitchen. On the other side of the building are private rooms, bath rooms, linen closet, office and reception hall.

In 1910-1911, the place was open and in charge of a physician and nurse. Twenty babies were admitted the first year, twenty-five the second year. In 1912, the board of directors asked me to take charge of it but my arrangements for the summer were already made, so the place was not opened. In May, 1914, the Sanitarium was again offered to me and with Miss Greene and three other nurses we opened the place on May 15. A letter was sent to all physicians telling them of the new arrangement and requesting that they send in a written history of each case, a written line of treatment and formulae for food. A committee was appointed to pass on the eligibility of any indigent case sent in. All parents able to pay were expected to do so, which was done cheerfully and willingly. The local physician answered any emergency calls and was in charge of any patient coming in without a physician. One hour each afternoon was set aside when the mothers in the cottages might consult with the superintendent in regard to their babies' food, etc. For these consultations a fee of fifty cents was charged, which went to the maintenance of the institution.

Our first patient was a baby ten days old whose mother was a waitress at the hotel. Having been working since the baby was forty-eight hours old, her milk was naturally upsetting the child. We put her on a modified milk preparation and she grew well and fat. The next was a case of entero-colitis after two weeks' illness, with a heart com-

plication and the worst looking mouth, tongue and throat I ever saw. They were a mass of white ulcers. On examination, a diagnosis of lues was made and the boy was isolated and treated with two injections of "606." Scarcely any reaction occurred. We were only able to feed him one ounce of milk or beef juice (greatly diluted) every three hours for two weeks. He improved and by the 20th of July was taking cereal, eggs, milk, beef juice, etc. He cut four teeth and was gaining about 2 ounces per day. Our third case was a baby girl with enterocolitis, sixteen months old. She was admitted to the hospital two days after she was first taken sick, with a temperature of 101 degrees and gave a history of thirty-eight bowel movements of blood and mucus during the previous twenty-four hours. Treatment consisted of saline-enema three times a day. Barley water was given the first two days. The bowel movements decreased to nineteen the first day in hospital. On the third day, liquid peptonoid was added to barley and on the fourth day one ounce of boiled milk was added every eight hours. Saline enemas were discontinued as soon as the blood disappeared. Oleum ricini was given every third day for two weeks. The patient dropped in weight to fifteen pounds, but at the end of her stay in the Sanitarium, six weeks, she weighed twenty-one pounds, four ounces. Except for the oleum ricini, no medicine was given and her physician did not see her in all that time. A weekly report was mailed to him.

I will cite one other case. A child twenty months old, weighing thirteen pounds, was brought in one morning at 6.30. The parents had ridden sixty miles from a ranch and the child had a temperature of 103 degrees. The history given was that of an illness of only three days with bowels moving on an average of twenty times per day. There was no blood but a considerable amount of mucus and an odor resembling onions. We gave oleum ricini and no food but barley water for twenty-four hours. After forty-eight hours the stools were free from mucus, the temperature 99 degrees and the child was given milk and cereal diet. She refused both and called for sausage, pie, cake, candy and soda water and even asked, "Is you dot any cheese?" Finally she was starved to her diet and at the end of five days showed a gain of two ounces. That was the first gain she had made for ten months and her mother was so delighted that she pleaded for a written schedule which she promised to follow. I saw the child six weeks later and would never have recognized her.

During the three months we admitted twenty patients. Eighteen returned to their homes cured, weighing more than they ever had done. The two who died were in a moribund condition when brought into the Sanitarium. We had to close the Sanitarium on the first of Septem-

ber because funds gave out. Five babies remained; two were sent to St. Mark's Hospital, El Paso, and three to their homes.

Milk for the babies in the cottages was prepared and delivered daily. Our hope for this year is to have the states of Texas, Oklahoma and Louisiana realize the blessed privilege of such a place for their sick babies and we hope to have it open from May 15 to September 15.

With the two wards kept full, we should need a nurses' home, as the private rooms now used for nurses could be turned into isolating rooms for the very sick babies. A generous, interested man has promised to duplicate the building we now have if the work demands it. It is most interesting work and the nurses who availed themselves of the chance to take the course there last summer felt well repaid.

A CASE OF UREMIC POISONING

By GENEVIEVE GILLESPIE, R.N.

Tecumseh, Michigan

Uremia, as we all know, is a diseased condition caused by retention in the blood of the waste substances which normally should be carried off by the kidneys. The disease may be of an acute or chronic form of nephritis.

The patient under my care was a boy ten years of age, suffering with acute nephritis and uremia. During the summer he had been doing nearly a man's work on the farm, as he was very ambitious and the father was glad to have his help. He was the eldest son in a family of six children. It was thought by the doctor that the heavy lifting and more or less exposure were too much of a strain on his back and kidneys, which brought on nephritis. For several mornings before he was taken to his bed, his mother would have to assist him in getting out of bed and walking down stairs. She thought this disability was due to his playing football at school for one-half hour each day.

One Sunday, at midnight, he complained of his head hurting him dreadfully and awakened his mother. He had quite a severe spasm, so the doctor was called for the first time. Upon his arrival, he ordered a corn-cob sweat for one hour. This was done by boiling corn cobs for ten minutes and wrapping them in old cloths and placing them around him, between a pair of blankets. As he was unable to void urine, a catheter was passed. On examination, the urine was found to be 75 per cent albumen. Magnesium sulphate dram one, was ordered every four hours until a thorough evacuation should occur. Every time there was a convulsion, he was put into a hot pack. By the time